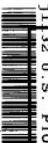


A/pe



**REISSUE  
PATENT APPLICATION  
TRANSMITTAL**

Attorney Docket No.	216172US0REISSUE
First Named Inventor	Myriam MELLUL et al.
Original Patent Number	5,985,297
Original Patent Issue Date	November 16, 1999
Title	ANHYDROUS AND WATER-RESISTANT COSMETIC COMPOSITIONS

<b>APPLICATION FOR REISSUE OF:</b>		<input checked="" type="checkbox"/> Utility Patent <input type="checkbox"/> Design Patent <input type="checkbox"/> Plant Patent
<b>APPLICATION ELEMENTS</b>		<b>ADDRESS TO:</b> Assistant Commissioner for Patents Box Patent Application Washington, DC 20231
<p>1. <input checked="" type="checkbox"/> Fee Transmittal Form (Submit an original and a duplicate for fee processing)</p> <p>2. <input checked="" type="checkbox"/> Specification and claims</p> <p>3. <input type="checkbox"/> Formal Drawing(s)</p> <p>4. <input type="checkbox"/> Reissue Oath or Declaration</p> <p>5. Original U.S. Patent</p> <p>    <input type="checkbox"/> Offer to surrender original patent</p> <p>    or</p> <p>    <input type="checkbox"/> Ribboned Original Patent Grant</p> <p>    <input type="checkbox"/> Affadavit / Declaration of Loss</p> <p>6. Original U.S. Patent currently assigned?</p> <p>    <input checked="" type="checkbox"/> Yes    <input type="checkbox"/> No</p> <p>If yes, check applicable boxes</p> <p>    <input checked="" type="checkbox"/> Consent of Assignee</p> <p>    <input type="checkbox"/> 37 C.F.R. §3.73(b) Statement</p> <p>    <input type="checkbox"/> Power of Attorney</p>		
<p>7. <input checked="" type="checkbox"/> Statement of status/support for all changes to the claims. See 37 CFR 1.173 (c). See Preliminary Amendment</p> <p>8. <input checked="" type="checkbox"/> Priority Claim (35 U.S.C. 119 and 120)</p> <p>9. <input type="checkbox"/> Information Disclosure Statement    <input type="checkbox"/> Copies of IDS (IDS)/PTO-1449</p> <p>10. <input type="checkbox"/> English Translation of Reissue Oath/Declaration</p> <p>11. <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.</p> <p>12. <input checked="" type="checkbox"/> Preliminary Amendment w/Marked-Up Copy</p> <p>13. <input checked="" type="checkbox"/> White Advance Serial No. Postcard</p> <p>14. <input checked="" type="checkbox"/> Other: Application Data Sheet; Terminal Disclaimer (copy from U.S. 5,985,297) Certificate of Correction (copy from U.S. 5,985,287)</p>		
<p><b>15. CORRESPONDENCE ADDRESS</b></p> <p>OBLON, SPIVAK, MCCLELLAND, MAIER &amp; NEUSTADT, P.C. FOURTH FLOOR 1755 JEFFERSON DAVIS HIGHWAY ARLINGTON, VIRGINIA 22202 (703) 413-3000 FACSIMILE: (703) 413-2220</p>		

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**REISSUE APPLICATION FEE TRANSMITTAL FORM**Docket Number  
216172US0REISSUE

## Claims as filed - Part 1

Claims in Original Patent	For	Number Filed in Reissue Application	Number Extra	Rate	Fee
17	Total Claims	39	19	x \$18 =	\$342.00
1	Independent	2	0	x \$84 =	\$0.00
Basic Fee (37 CFR 1.16(h))					\$740.00
<input checked="" type="checkbox"/> Late Filing of Declaration					\$130.00
Total of above calculations					\$1,212.00
<input type="checkbox"/> Reduction by 50% for filing by small entity					\$0.00
					<b>Total Filing Fee</b> <b>\$1,212.00</b>

Please charge Deposit Account No. 15-0030 in the amount of \_\_\_\_\_ A duplicate copy of this sheet is enclosed.

The Commissioner is hereby authorized to charge any additional fees under 37 CFR 1.16 or 1.17 which may be required, or credit any overpayment to Deposit Account No. 15-0030. A duplicate copy of this sheet is enclosed.

A check in the amount of \$1,212.00 to cover the filing/additional fee is enclosed.

11/16/08

Date

Signature of Applicant, Attorney or Agent of Record

Richard L. Treanor  
Registration No.: 36,379

Typed or printed name